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FEB 22 2006

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application No.	10/045,414
		Filing Date	January 12, 2002
		First Named Inventor	Mikael Mortensen
		Art Unit	2195
		Examiner Name	Ali, Syed J.
Total Number of Pages in This Submission	13	Attorney Docket Number	42390P12312

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> Facsimile Transmittal Sheet </div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Brent E. Vecchia, Reg. No. 48,011 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	<i>Brent E. Vecchia</i>
Date	February 22, 2006

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Pat Sullivan		
Signature	<i>Pat Sullivan</i>	Date	February 22, 2006

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/r) 11/30/2005.
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**FEE TRANSMITTAL
for FY 2005**

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

0.00

Complete if Known

Application Number 10/045,414
 Filing Date January 12, 2002
 First Named Inventor Mikael Mortensen
 Examiner Name Ali, Syed J.
 Art Unit 2195
 Attorney Docket No. 42390P12312

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify):☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.☒ Credit any overpayments**FEE CALCULATION****1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
23	32*	0	\$0.00
6	9*	0	\$0.00

Multiple Dependent

Large Entity	Fee Code	Fee (\$)	Fee Description
1202	50	25	Claims in excess of 20
1201	200	100	Independent claims in excess of 3
1203	360	180	Multiple Dependent claim, if not paid
1204	790	395	**Reissue independent claims over original patent
1205	300	150	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1)

(\$)

0.00

*or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

Large Entity	Fee Code	Fee (\$)	Fee Description
1051	130	65	Surcharge - late filing fee or oath
1052	50	25	Surcharge - late provisional filing fee or cover sheet
2053	130	65	Non-English specification
1251	120	60	Extension for reply within first month
1252	450	225	Extension for reply within second month
1253	1,020	510	Extension for reply within third month
1254	1,590	795	Extension for reply within fourth month
1255	2,160	1,080	Extension for reply within fifth month
1401	500	250	Notice of Appeal
1402	500	250	Filing a brief in support of an appeal
1403	1,000	500	Request for oral hearing
1461	1,510	1,510	Petition to institute a public use proceeding
1460	130	65	Petitions to the Commissioner
1807	50	50	Processing fee under 37 CFR 1.17(g)
1808	180	180	Submission of Information Disclosure Stmt
1809	790	395	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	790	395	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

SUBTOTAL (2)

(\$)

Fee Paid

SUBMITTED BY

Name (Print/Type) Brent E. Vecchia Registration No. 48,011 Telephone (303) 740-1980
 Signature [Signature] Date 02/22/06

Complete (if applicable)

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/1) 12/15/2004.
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**FEE TRANSMITTAL
for FY 2005**

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

0.00

Complete if Known

Application Number	10/045,414
Filing Date	January 12, 2002
First Named Inventor	Mikael Mortensen
Examiner Name	Ali, Syed J.
Art Unit	2195
Attorney Docket No.	42390P12312

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☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☒ Credit any overpayments**FEE CALCULATION****1. EXTRA CLAIM FEES**

Total Claims	23	- 32*	= 0	x	50.00	=	\$0.00
Independent Claims	8	- 8*	= 0	x	200.00	=	\$0.00
Multiple Dependent							

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	50	2202	25	Claims in excess of 20	
1201	200	2201	100	Independent claims in excess of 3	
1203	360	2203	180	Multiple Dependent claim, if not paid	
1204	790	2204	395	*Reissue independent claims over original patent	
1205	300	2205	150	*Reissue claims in excess of 20 and over original patent	
SUBTOTAL (1)				(\$)	0.00

*or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1460	130	2460	130	Petition to the Commissioner	
1807	50	1807	60	Processing fee under 37 CFR 1.17(q)	
1808	180	1808	180	Submission of Information Disclosure Sheet	
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)					
SUBTOTAL (2)				(\$)	

SUBMITTED BY

Name (Print/Type)	Brent E. Vecchia	Registration No. (Attorney/Agent)	48,011	Telephone	(303) 740-1980
Signature	<i>Brent E. Vecchia</i>	Date	02/22/06		

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (Mfr) 12/15/2004.
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